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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/371,972	08/10/1999	KONSTANTINE I. IOURCHA	PA1774US	9872
22830 CARR & FERI	7590 05/16/200 RELLUP	7	EXAMINER	
2200 GENG ROAD			GOOD JOHNSON, MOTILEWA	
PALO ALTO, CA 94303			ART UNIT	PAPER NUMBER
			2628	
			MAIL DATE	DELIVERY MODE
	•		05/16/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

## Application No. Applicant(s) 09/371,972 IOURCHA ET AL. Interview Summary Examiner **Art Unit** Motilewa Good-Johnson 2628 All participants (applicant, applicant's representative, PTO personnel): (1) Motilewa Good-Johnson. (2) Susan Yee. Date of Interview: 13 November 2006. Type: a) ▼ Telephonic b) Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e) No. If Yes, brief description: \_\_\_\_\_. Claim(s) discussed: none. Identification of prior art discussed: none. Agreement with respect to the claims f) $\square$ was reached. g) $\square$ was not reached. h) $\square$ N/A. Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Examiner faxed a copy of the considered IDS submitted 12/27/1999, which was resubmitted as a fax on 02/11/2005, due to lost original submitted IDS on 12/27/1999. (A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.) THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER. TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required